1 state	3	BUREAU OF \	BOARD OF HEALTH VITAL STATISTICS ATE OF DEATH Do not use this space. 34738
ECORD IVSICIANS should	B.—Every item of information should be carefully supplied. AGE Should be stated EXAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of	1. PLACE OF DEATH County Registration Distr Township City Laura (No. 1. Johnson 1991) 2. FULL NAME Lavid H. Lully	ion District No. Registered No. 8902
CTLY. PE		(a) Residence, No. 5.2 3 Massach St. (Usual place of abode) Length of residence in city or town where death occurred yrs. mos.	(If nonresident, give city or town and State)
WHILE PLAINLY, WITH UNFADING INKTHIS IS A PERMAR		PERSONAL AND STATISTICAL PARTICULARS 3. SEX 4. COLOR OR RACE 5. SINGLE. MARRIED. WIDOWED. OR DIVORCED (Write the word) MUSBAND OF (OR) WIFE OF 6. DATE OF BIRTH (MONTH. DAY, AND YEAR) 7. AGE 7. AGE 8. Trade, profession, or particular kind of work done, as splaner, or min. 8. Trade, profession, or particular kind of work done, as silk mill. Saw mill. bank, etc. 9. Industry or business if which work was done, as silk mill. 10. Date deceased last worked at this occupation (month and year) 11. Total time (years) 12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) 13. NAME 14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) 15. MAIDEN NAME 16. BIRTHPLACE (CITY OR TOWN) 17. INFORMANT (ADDRESS) 18. BURIAL, CREMATION, OR REMOVAL PLACE 19. UNDERTAKER (ADDRESS) 19. UNDERTAKER (ADDRESS) 10. FILED 11. Total time (years) spent in this occupation 11. Total time (years) spent in this occupation 12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) 17. INFORMANT (ADDRESS) 18. BURIAL, CREMATION, OR REMOVAL PLACE 19. UNDERTAKER (ADDRESS) 20. FILED 11. TOTAL TIME 12. DATE 13. REGISTRATE Registrar.	MEDICAL CERTIFICATE OF DEATH 21. DATE OF DEATH (MONTH, DAY, AND YEAR) 22. I HEREBY CERTIFY, That attended deceased from 19, 19, to 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date stated above, at 19 Death is said to have occurred on the date of ease of the date of the d
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